

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

OHS-000-001-295

Name	RMI Company				
Street	1000 Warren Avenue				
City	Niles	State	Ohio	Zip Code	44446

Name of Site RMI^{CO} Sodium Plant

Street State Road at East 6th Street

City Ashtabula County Ashtabula State Ohio Zip Code 44004

Name (Last, First and Title) Holman, Joe - Staff Environmental Engineer

Phone (216) 652-9951

From (Year) 1950 To (Year) 1980

322540

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Course of Waste:
Place an X in the appropriate boxes.

1. ☐ Mining
2. ☐ Construction
3. ☐ Textiles
4. ☐ Fertilizer
5. ☐ Paper/Printing
6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☐ Chemical, General
9. ☐ Plating/Polishing
10. ☐ Military/Ammunition
11. ☐ Electrical Conductors
12. ☐ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
16. ☐ Lab/Hospital
17. ☐ Unknown
18. ☐ Other (Specify)

EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

[illegible]

000064 JUN -581

JUN 05 1981

Notification of Hazardous Waste Site**Side Two****F Waste Quantity:**

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount:

cubic feet 1,250,000 *C*

gallons _____

Total Facility Area

square feet 156,750 *S*

acres _____

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☒ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

SEE ATTACHMENT #1

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

Landfill of a low area for a period from 1950 until 1980. Fill consisted of various solid inert materials, dissolver sludge and spent cell bath. No fill has been added to the present site since November 18, 1980. Enter plant main gate and proceed to southeast corner of plant property via plant roadways. Lake Erie is located approximately 1/2 mile due north.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

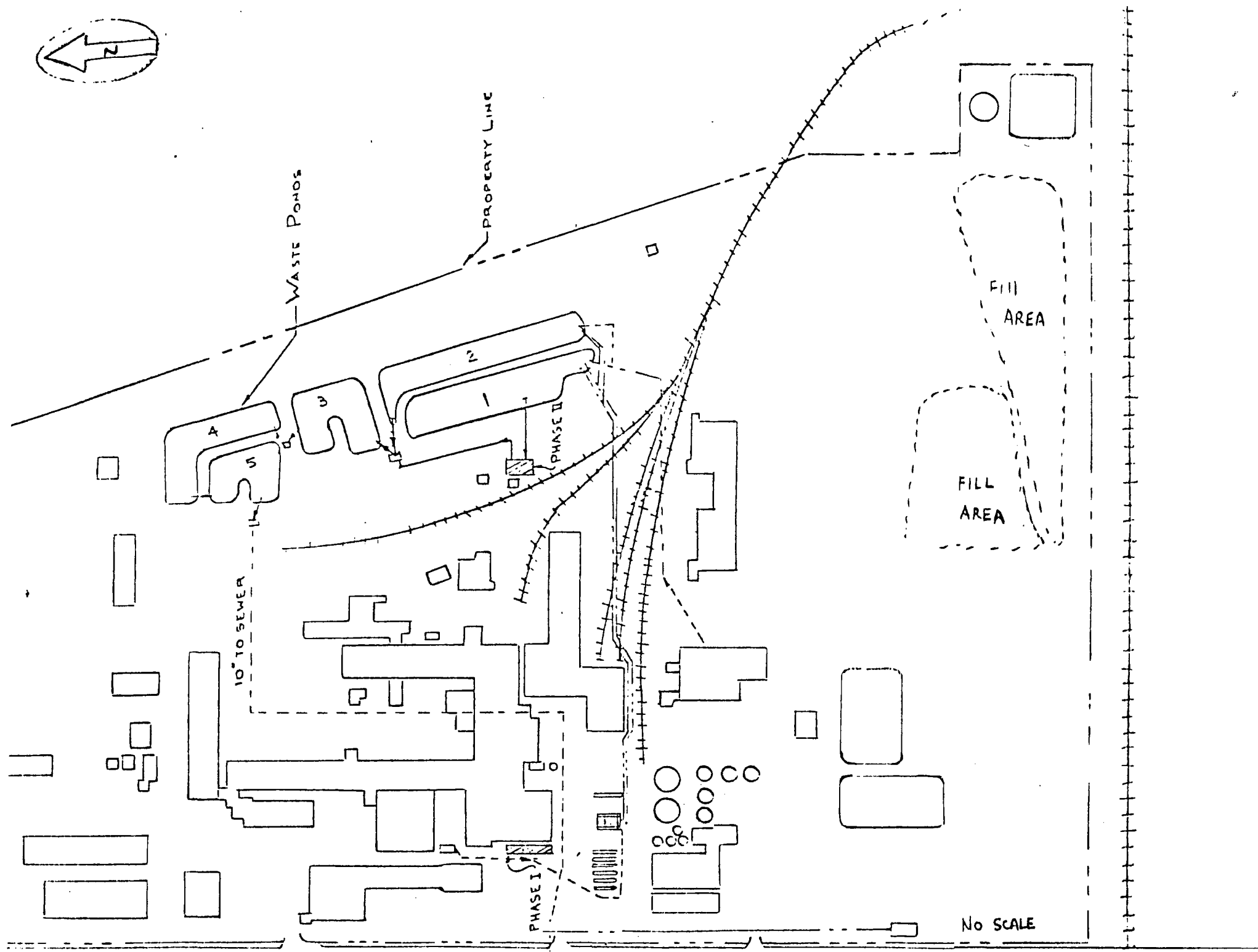
Name E. R. Toth, Jr.

Street _____

City _____ State _____ Zip Code _____

Signature *E. R. Toth, Jr.* Date 6/5/81

- ☒ Owner, Present
- ☐ Owner, Past
- ☐ Transporter
- ☐ Operator, Present
- ☐ Operator, Past
- ☐ Other



ATTACHMENT #1 (FOR SECTION H)

EAST 115 ST →

RMT SODIUM PLANT ASHTABULA OHIO